Living with Urinary Incontinence: A Longitudinal Study of Older Women

Abstract:

Purpose: Urinary incontinence carries major social burden and considerable costs for health care systems. The aim of this study was to investigate changes in continence status among a large cohort of older women, and to identify factors associated with incidence of incontinence, and with improvements in continence status in later life.

Methods: Women are participants of the Australian Longitudinal Study of Women's Health (ALSWH), aged 70-75 years in 1996 and who have completed four health surveys over the past 10 years. Transitions in continence status were defined according to women's reports of “leaking urine” at each survey. General Estimating Equation models were in longitudinal analyses of the factors associated with changing continence status over time.

Results: This study presents longitudinal data on the prevalence and incidence of incontinence from a large cohort of older women, over six years of follow-up. Over this time, 20% of the women in the study developed incontinence, and only a minority of women (2.3%) reported incontinence that was not present at later surveys. Around one-third of women reported incontinence on at least one survey; and 27% of women participating in Survey 4 in 2005 reported leaking urine sometimes or often at that survey, with women being twice as likely to report incontinence at this survey as they were six years earlier. Incontinence was clearly associated with lower physical and social functioning, but these differences also preceded the reporting of leaking urine. Parity was not strongly associated with incontinence, but other factors in the gynaecological history including prolapse, prolapse repair, and hysterectomy were. Constipation and dysuria were also strongly associated with incontinence in the longitudinal models.

Conclusion: The findings have important implications for prevention and management of incontinence at older ages.